

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>LW</i>	<i>32</i>	<i>2/28</i>
FORMALITY REVIEW	<i>866</i>	<i>1091</i>	<i>04-25-01</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 : ..... Restricted      O ..... Objected

Claim	Final	Original	Date
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49			
50	✓	✓	✓

Claim	Final	Original	Date
51	✓	✓	✓
52	✓	✓	✓
53	✓	✓	✓
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55	✓	✓	✓
56	✓	✓	✓
57	✓	✓	✓
58	✓	✓	✓
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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